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**Standards and Guidelines for the  
Management of Child Abuse Cases under  
the Child Welfare Act, 1978  
by the Children's Aid Societies  
Training Materials**



Ministry of  
Community and  
Social Services

Children's  
Services  
Division

November 1979







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MEMORANDUM TO: Local Directors of Ontario  
Children's Aid Societies

FROM: Judge George M. Thomson  
Associate Deputy Minister  
Children's Services Division

RE: The Standards and Guidelines for the  
Management of Child Abuse Cases under  
The Child Welfare Act by the Children's  
Aid Societies

The Standards and Guidelines for the Management of Child Abuse Cases under The Child Welfare Act by the Children's Aid Societies were developed as a result of plans for implementation of the Report of the Task Force on Child Abuse, which was tabled in the Legislature in June, 1978. They complement numerous other actions related to providing effective service for children in high risk situations, such as improved emergency services, provision of additional staff for the Children's Aid Societies, provision of the means to assure access to proper legal consultation, a variety of measures designed to enhance inter-professional cooperation, and training programs for professional staff of the Societies as well as foster parents.

Because we want to be sure that they are realistic and practical for both the Ministry and the Children's Aid Societies we are introducing them now as training materials for use in the Supervisors' and Front-Line Protection Workers' training programs. It is possible that further changes will be made prior to their acceptance as a Ministry statement and possible introduction as regulations under the Act.

I would like to recognize the important contribution made by Ross Dawson, Assistant Director of the Algoma Children's Aid Society for his work in developing the initial document. The development process, of course, included consultation with a number of professionals from across the Province who had experience in the handling of child abuse cases.

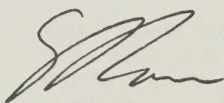
Development of standards and guidelines for such an emotionally charged and controversial area as child abuse is not a simple task. Nor should it be undertaken without the involvement of those persons most knowledgeable and most closely affected.

In early April of this year an earlier version of this document was released for discussion with Children's Aid Societies. Since the standards and guidelines affect the Children's Aid Societies very vitally, we wanted staff of the Societies to study them and to give us their reactions and suggestions for improvement before any wider distribution took place. We were also pleased to receive input from child abuse teams, hospital staff, representatives of the legal and medical professions, and law enforcement agencies.

This consultation process and editing of the initial document were carried out by Mr. Jim Dickinson. I am convinced that this procedure as well as the response anticipated from the training programs will result in a final document that will be applicable in all parts of Ontario and that will serve children at risk well.

Use of this document as training materials should help to assure that the Ministry and the Societies have a common understanding of what is desirable in the management of child abuse cases beyond the strictly procedural aspects.

Sincerely,

A handwritten signature in dark ink, appearing to read 'G. Thomson', written in a cursive style.

Judge George M. Thomson  
Associate Deputy Minister

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## **A. INTRODUCTION**

The goal in development of these standards and guidelines is to ensure, as far as possible, an adequate and uniform level of service for abused children, for children alleged to have been abused and children at risk throughout the Province. It is believed that many of the standards and guidelines contained in this document represent the level of service that currently exists. They formalize responsible case management rather than advocate entirely new approaches.

It is expected that the Children's Aid Societies will incorporate the standards described in this document into their general intake and protection policies. Those case management processes described as guidelines represent desirable or optimal practice.

### **Overview**

The overall direction of a Society's child abuse program should be undertaken only by supervisors who have experience and appropriate specific knowledge, training and experience in all aspects of child protection service. Assignment of management responsibility for child abuse cases should be made only to case workers who have had training and experience in handling child abuse cases.

The management of child abuse investigations and cases must be given top priority in the services offered by the Society.

All Children's Aid Society staff must be aware of their responsibilities as stated in The Child Welfare Act, 1978. The Societies must ensure that all existing and all new protection staff dealing with or likely to deal with cases of child abuse receive appropriate and adequate training in child abuse case management. The Ministry of Community and Social Services must ensure that such training programs and other learning opportunities are provided for the Societies.

It is important to recognize that abuse or alleged abuse may occur in care as well as within the family and that the following standards and guidelines are applicable in these situations as in any other situation.



Given the current state-of-the-art of the helping professions, treatment of the abused child and the abusing family is both ambiguous and nebulous. The line that distinguishes discipline from abuse continues to be undefined. The fact that there does not exist absolute definitions of these terms places the front line family protection social worker in child welfare in a difficult role. To be without sufficient clarity may undermine and frustrate. The challenge is to devise sound operational measures of service. The refinement of what is abuse and what one reports to the Central Register as serious abuse rests with the discretion of the Children's Aid Society. They must do this by deploying their provincial mandate in response to their local community in conjunction with the direction of their local courts.

These standards and guidelines stress the importance of the involvement of not only the front line workers, but also the supervisors, the verification process, the involvement of other professions, and the community in meeting the challenge of protecting children and preventing their abuse.

A parent is in a very difficult position when approached by a social worker in respect to child abuse. This vulnerability is manifest in a variety of ways, all of them calling for appreciable helping skills on the part of the social worker. The dual role of helping a family to relate and resolve their problems in a socially acceptable fashion and investigating the family to possibly make submissions to court is most demanding and commands much professional skill and integrity. A social worker's authority, legally mandated in The Child Welfare Act, 1978, opens the door, but his professional competence as a helping person is what results in a constructive helping and working relationship. The Act is the route; the professional expertise is the vehicle to effect significant change and hence protect the child in the best possible manner. In some instances, social workers are restricted to an authoritarian role in which the court is used and they are limited to supervision and monitoring, but if the role is restricted to oversee and monitor they may never conclude. The child in the family will be dependent upon the social worker and the short-term changes will only be durable as long as they are monitoring.

The family protection worker in child abuse cases must seek to help and rehabilitate the family to help themselves. Counselling individuals and families wherever possible to ensure the protection and welfare of the child is the optimal goal. The role of the family protection worker may be therapeutic, punitive, and/or preventive. They have the potential to be vital to the alleviation of stress and rehabilitation of the family. They have the opportunity to ensure the safety of the child and enhance the parent's responsibility to care for and protect their own child.

Helping the family to help themselves is the treatment of choice. Caution must be exercised to ensure that reporting and legally dealing with child

abusing parents is not overemphasized to the point of exclusion of the consideration of the helping role and ongoing treatment. These standards and guidelines are mainly procedural in nature, outlining what the social worker might/ought to have done without entering into the issue of what is the appropriate therapeutic approach. Thus, the content of social work practice is minimally dealt with in these standards and guidelines.

We are in a stage of infancy in child abuse. Not until the 1960's and now much more intensively throughout the 1970's have we competently recognized the maltreatment of children by their parents. We do now know a little about the causes and dynamics of child abuse and much less about effective social intervention and treatment.

Our pursuit is for the best interest of the child. However, we have much need for hard or empirical data in our search to demonstrate the best possible way to work with violent families. The Child Welfare Act, 1978, is broad in that it includes physical harm, malnutrition, mental ill-health and sexual abuse. Child abuse is very difficult to prove beyond a reasonable doubt. The evidence is usually circumstantial. The victim is usually too young or frightened to testify and rarely are there witnesses. Furthermore, medical evidence often is insufficient to make a conclusion of child abuse. Hence, in work with child abuse and abusers, we are entertaining a vague, troublesome, traumatic and potentially explosive task.

Prevailing conceptions of what constitutes the limits of acceptable child discipline and punishment differ throughout our communities and, indeed, the whole province. Similarly, the legal issues of children's rights and parent's rights are undergoing change. The whole issue of the "best interest" of the child is often conflicted with the "least damaging" or "most therapeutic" concerns of social workers and the legal profession.

Just as there is no definitive set of factors that characterize the dynamics of households in which children are abused, so too there exists no singular, definitive set of characteristics of parents (or caretakers) who abuse children. The indicators of abuse, except for physical injuries themselves, are not the last word in diagnosis and usually not sufficient guidance for judges. Prediction of risk of abuse is questionable given the current state-of-the-art of the behavioural sciences.

Consequently the expertise and discretion of family protection service workers are the crux of the service delivery. Whatever treatment, protection, and prevention that takes place rests with them.

Social work in the protective service area is difficult, demanding and stressful, particularly in the management of child abuse cases. In recognition of this factor it is recommended that protection workers have generalized case loads as opposed to case loads composed entirely of child abuse cases. Where possible, specialized child abuse case loads should be significantly reduced. Provision should be made for the regular systematic monitoring of case load weighting both at intake and throughout case management, to prevent 'overload' and 'burn out'

In addition, provision should be made for a systematic annual review of each Children's Aid Society staff person's case load and performance in the area of child abuse. Included in this review should be the option and opportunity for reassignment within the Society at an early date and provision, as soon as possible, for attendance at special educational opportunities such as seminars or short courses relevant to social work with the abused child and the family.

In all initial child abuse investigations, and at other appropriate stages of case management, where the Children's Aid Society is providing service alone, the worker assigned to the case should have back-up assistance from a senior worker or from a supervisor. This will ensure that the family has access to persons in addition to the assigned worker who are knowledgeable about their situation. It will also provide the assigned worker with support and assistance as may be needed.

The Ministry of Community and Social Services is available for consultation at all stages throughout the management of child abuse cases. This consultation may be obtained by the Children's Aid Society through any of the following:

- a) a Program Advisor,
- b) Child Abuse Program Co-ordinator or Consultants,
- c) Ministry of Community and Social Services, Legal Services Branch.

In addition, the Ministry personnel contacted may be able to facilitate further consultation with other professionals with specific or additional expertise in child abuse.



## B. GLOSSARY OF TERMS

### Assessment Team

The definition of assessment team refers generally to a team composed of professionals, colleagues and consultants who, with their combinations of knowledge and skill are able to provide a clearer understanding of a child and/or family. In these standards and guidelines the assessment team is usually the interdisciplinary child abuse team.

### Case Conference

A case conference, in these standards and guidelines, refers to a meeting attended by as many people as possible involved in a case of child abuse for the purpose of evaluating facts and sharing professional opinions regarding a case of alleged abuse. Case conferences are consultative in nature, decision making resting with the Society's worker and supervisor.

The form of such a conference is determined by the need of the situation.

The following case conference models should be considered and the appropriate model utilized:

- 1) A conference with all case related staff including the Children's Aid Society supervisor (See "Case Supervision", Chapter 12, page 48).
- 2) A conference with the local child abuse team. In addition to regular team members the following persons should be in attendance:
  - Children's Aid Society protection worker
  - Children's Aid Society child care worker
  - Children's Aid Society supervisor (where appropriate)
  - Alternate care providers (where appropriate)
  - Any additional professionals involved in the assessment/ investigation
  - Other professionals actively involved with the child/family
- 3) Where no formal child abuse team is in operation the case conference should include all professionals actively involved with the family, professionals who may not be actively involved but have significant data with respect to the family, a Children's Aid Society worker and a Children's Aid Society supervisor.

(Where possible, the multidisciplinary model (#2) is recommended.)

## Central Register

The Central Register referred to in The Child Welfare Act, 1978, means a central file where all cases of verified abuse are recorded specifically for purposes of monitoring, tracking and research. For reporting requirements see Section 52, The Child Welfare Act, 1978, Guidelines to the Legislation - training materials prepared by the Children's Services Division in January, 1979 (Yellow Book); Supplementary Training Materials on Child Abuse Reporting Laws (January 1979) prepared by Children's Services Division, June 1979. See "Verification of Information of Abuse" (Chapter 2, page 19).

## Child Abuse

The definition of child abuse employed in these standards and guidelines is that used in Section 47 of The Child Welfare Act, 1978.

'Abuse' means any of the following conditions:

- (i) physical harm,
- (ii) Malnutrition or mental ill-health of a degree that if not immediately remedied could seriously impair growth and development or result in permanent injury or death,
- (iii) Sexual molestation,

inflicted upon a child, or permitted to be inflicted upon a child by the child's parent or any person having the care, custody, control or charge of the child under sixteen years of age.

## Child at Risk

This is a child who is exposed to the danger of incurring probable injury through child abuse.

## Emergency Situation

An emergency situation means any situation in which a child's physical or emotional well-being appears to be in immediate danger.

## Investigation

Investigation is the process of interviewing, observing, evidence gathering and assessing through which reports of child abuse are verified or invalidated. See "Investigation" (Chapter 1, page 10).

## Parent

This is defined in The Child Welfare Act, 1978 s.19 and means

- i) a child's biological parent
- ii) a guardian
- iii) a person who has demonstrated a settled intention to treat a child as a child of the person's family, and
- iv) a person recognized under the Children's Law Reform Act as a "parent"
- v) a person who is not recognized in law to be a parent of a child but,
  - 1. has acknowledged a parental relationship to the child and has voluntarily provided for the child's care and support,
  - 2. by an order of a court of competent jurisdiction or a written agreement, is under a legal duty to provide for the child or has been granted custody of or access to the child, or
  - 3. has made a written acknowledgement of the fact of his or her parentage to the society having or applying for the care or supervision of the child.

In abuse situations it must be remembered that not only parents abuse children. The abuser may be anyone, from a babysitter to a teacher or any adult who has charge of the child, or a person who is a stranger to the child. In these standards and guidelines such persons are included in the general term "caretaker".

## Place of Safety

The definition of "place of safety" employed in these standards and guidelines is that used in The Child Welfare Act, 1978 S.19(f) and means a receiving home, foster home, hospital, and such other place or class of places designated in writing by a Director, but does not include a training school under The Training Schools Act.



## Verification of the Information of Alleged Child Abuse

The Child Welfare Act, 1978, 52(2) directs every Society that receives information of child abuse shall, after the information is verified in the manner determined by the Director, report the information to the Director. The manner of reporting is the Form 6, Report to Child Abuse Register, which is a report of verified information concerning alleged abuse of a child. See "Verification of Information of Abuse" (Chapter 2, page 19).

## Standards

As defined in this paper, standards specify the criteria against which the performance of persons, agencies, or programs will be measured. A standard is prescribed by regulation and is mandatory.

Standards must be expressed in precise, measurable terms. Standards for delivery may address:

- o the need for clearly defined descriptions of programs, and for consistency and congruence of the activities undertaken to deliver these programs
- o a necessary minimum state or level of performance
- o a required state or level of performance.

To have meaning as accountability measures, standards must be derived from the best existing knowledge, based on agreed-upon and precise definitions, and they must be enforceable and enforced.

## Guidelines

Rather than standards, guidelines may be set out for several reasons:

- o where standards cannot be expressed in precise, measurable terms; or measures could be defined but there is no universal agreement on values and practices
- o to allow greater flexibility and discretion of practice
- o to indicate a preferred practice that may become a standard when supporting performance measures are developed or professional consensus is reached on the best practice

- o to indicate desired behaviour and interactions that cannot be thoroughly codified such as attitudes of affection, confidence and trust
- o to indicate a desired state or level of performance.





## 1. INVESTIGATION

### Commentary

Child abuse cases are given and should continue to be given the highest priority in the provision of Children's Aid Society service. The standards and guidelines written under this section describe a general process which should be followed by Societies in the investigation of all child abuse referrals. While it is desirable that Children's Aid Society intervention be as therapeutic as possible, the first priority during the process of investigating an alleged child abuse is to determine the child's need for protection.

### Investigation

The process of investigation has four phases:

- 1) receipt of report
- 2) information gathering
- 3) assessment
- 4) verification of the information (Chapter 2).

Obtaining facts is crucial in order to make the correct diagnosis of a case; therefore, as extensive an evaluation as possible of a child's environment should be made to determine the appropriate service to be provided by the Children's Aid Society. In some instances, as in cases where there appears to be immediate danger to the child, it may not be possible to make the detailed recording of facts which are ultimately desired. (See Record Keeping.) Information is obtained from, but not limited to, record checks, interviews, medical examinations, reports from other agencies, and examination of the child's environment.

The Child Welfare Act, 1978 makes provision for the Children's Aid Society to request information and reports from other agencies/professionals during the investigation process which will assist in determining the child's need for protection. Where the other agency refuses to share the information, the Children's Aid Society may seek a court order under Section 50 of The Child Welfare Act, 1978. It is reasonable to expect that in an effort to provide adequate service to children, close working relationships between the Children's Aid Societies and other service providers is desirable.

The expertise of the investigating social worker is crucial to acquiring information during the initial investigation phase which will provide the factual basis for good decision-making. Equally important is experience, continuing staff training and supervision. In addition, information from the following specific areas should be considered. These indicators should serve simply as a guide to workers to assist them in weighing all the facts regarding a particular alleged child abuse case.

- 1) Physical Indicators
- 2) Behaviour Indicators
- 3) Relationship Indicators
- 4) Specific Family Dynamics

The skills of the investigating social worker in gathering the facts from as many sources as possible and making an assessment are essential. It must be emphasized that no one factor or indicator by itself leads to a diagnosis, but rather a diagnosis is based on the accumulation of correlated facts and careful assessment.

A formal assessment of the child and family could take place through one of the following:

- 1) the Children's Aid Society professionals
- 2) court may order an assessment, after finding a child in need of protection to assist the court in making a disposition. (Section 29, The Child Welfare Act, 1978.)
- 3) expertise of a local child abuse team, e.g., pediatric examination, psychiatric consultation, etc.
- 4) through referral or utilization of existing community agencies, e.g., mental health clinic.
- 5) psychological/developmental/pediatric assessment of children who are admitted to a hospital or other place of safety.

The assessment of a child, who is in the care of a Society, may be undertaken without a court order prior to the finding that the child is in need of protection.

As a result of this assessment, a plan should be devised which represents the application of judgement, experience and knowledge in assessing the information available to determine what are realistic and attainable goals and how they may be achieved.

Verification of the information alleging abuse may take place at any stage of the investigation into an allegation of child abuse, if sufficient documentation for such a decision is available. Generally the procedure used should be a case conference where all available information concerning the alleged abuse should be carefully evaluated.

## **IN-01            General**

### **General**

The role of the investigating worker is a dual one to serve the community by:

- 1) ensuring the protection of children,
- 2) counselling children and families to safe, socially acceptable lives.

### **STANDARDS**

INS-01.1        The initial investigation report shall be recorded within twenty-one days of the receipt of the complaint.

INS-01.2        All Children's Aid Society officers shall carry cards with photographs identifying them as officers of a Society.

INS-01.3        Society management shall ensure that all staff, including after-hours duty staff are officers of a Society and thus empowered to apprehend children believed to be in need of protection.

## **IN-02            Receipt of Report**

### **STANDARDS**

INS-02.1        The investigation process of an alleged child abuse shall be initiated within one hour after receiving the report. (Note: This would require that a staff member is given responsibility for initiating a response to a complaint. This initial response process may take one of many forms, depending on the facts known).

- INS-02.2 Reports of alleged child abuse shall be recorded within twenty-four hours of receipt.
- INS-02.3 Police shall be informed of all complaints received of alleged child abuse according to a predetermined plan that will have been worked out jointly by the police and local Children's Aid Society. (see POS-01.17) (see "Police Involvement", Chapter 4, page 27, and "Case Supervision", Chapter 12, page 48).
- INS-02.4 In all cases where the Children's Aid Society has been informed of an alleged abuse, the Children's Aid Society shall exercise discretion whether to initiate and proceed with an investigation even when police investigations are proceeding.

Guideline

- ING-02.1 Upon receipt of an initial report, as complete details as possible regarding the allegation should be obtained and recorded and should include as much as possible of the following:
- a) full name, age, birthdate, address, telephone number, religion of child
  - b) full names, ages, addresses, telephone number, religion of parents
  - c) current whereabouts of child
  - d) current whereabouts of and how parents can be contacted
  - e) as complete details as possible of alleged occurrence
  - f) complete details of other incidents or suspicions of abuse
  - g) a medical examination and documentation of results
  - h) names, ages and condition of siblings at home
  - i) name, address, telephone number of other possible witnesses or persons having relevant information about the child/family, e.g., school, doctor, public health person, social service agencies, etc.



- j) name of family doctor
- k) details of other agencies knowledgeable about the family
- l) a record of police notification
- m) name of school, nursery, day care centre which child attends
- n) attempt to get name, address, phone number of the reporter and relationship to the family reported
- o) some assessment as to the motivation of the person making the report
- p) previous address or location of family.

ING-02.2

Respect for the rights and integrity of the client is essential to sound social work practice. This is the foundation for the client and social worker relationship that is developing. Informing the client of the process of investigation (which includes the working relationship of the Children's Aid Society and the Police) is desirable practice. In situations where informing the parents may impede the initial investigation and endanger the child, discretion is expected.

IN-03

### **Information Gathering Process**

#### STANDARDS

INS-03.1

When child abuse is suspected, the initial investigation process could potentially include the following interviews:

- a) face-to-face interview with child and parent(s)/caretaker(s)
- b) interview with reporter of abuse, where the identity of the reporter has been ascertained
- c) interview with siblings
- d) interview with other witnesses, relatives, neighbours who may have information regarding the family
- e) interview with other professionals knowledgeable about the family.

INS-03.2 The following record checks shall be made and documented either at the initial or at a subsequent phase of the investigation.

- a) a check of local Children's Aid Society records for previous incidents of abuse
- b) a check with Children's Aid Society in family's previous area(s) of residence
- c) a check of records of Central Register within 3 days
- d) a check with other local agencies that have had or may have had contact with the family.

INS-03.3 The child alleged to have been abused shall be seen as soon as possible and no later than twelve hours after receipt of the initial report, and the visit shall be documented as soon as possible. In the more remote areas of the province, this shall be subject to the limitations of travel and climate. The investigating Society may appoint a designate of the Local Director to initially see the child in these circumstances. If necessary, the designate will be instructed to protect the child. Whether the designate substantiates the abuse or not, the child will be seen by the investigating social worker and the visit documented as soon as possible.

INS-03.4 Where serious physical injury which is thought to be a consequence of abuse is suspected, a medical examination shall be arranged as soon as possible and no later than 24 hours. Discretion shall be used relative to the needs and sex of the child if the investigating social worker elects to physically examine the child. Such examination shall take place only with the permission of the parent(s)/caretaker(s) in the presence of the parent(s)/caretaker(s). A record of such examination shall be documented.

INS-03.5 In all instances where the parent refuses access to or examination of the child, the child shall be apprehended and examined by a community health professional (see "Court Involvement", Chapter 5, "Police Involvement", Chapter 4, and The Child Welfare Act, 1978), Section 19(1)(b)(xi).

INS-03.6 Siblings shall be seen and examined and results documented where:

- a) reporters suggest other children may be or have been abused
- b) the identified child is injured or abused
- c) present circumstances suggest other children may be abused or at risk.

- INS-03.7      The examining doctor shall be advised that abuse is suspected and that a full and careful examination and report are required.
- INS-03.08     Where young children have been or likely have been abused or where head or internal injuries are suggested, a skeletal survey by x-ray shall be requested.
- INS-03.9      The date, doctor's name and details of exactly what evidence of injury/neglect is found, as well as opinion of the cause, shall be obtained and recorded.
- INS-03.10     In all cases the worker shall learn of the doctor's findings directly, and not via the parent or anyone else.
- INS-03.11     Relevant reports shall be sought immediately from all professionals and agencies involved with the family. Where this information has been given verbally, the informant shall be requested to confirm the report in writing. Consents, of release of information, which respect the integrity of the parent are expected wherever possible.

#### Guidelines

- ING-03.1      Medical examinations should be conducted by a pediatrician who is experienced in child abuse cases. When this is not available, the following alternatives should be used:
- 1) the child's own family doctor
  - 2) emergency department of nearest hospital
  - 3) a doctor with whom the Children's Aid Society has a special working relationship
  - 4) a doctor on a child abuse team
  - 5) any other available doctor.

- ING-03.2 In ensuring that the child has a medical examination, these approaches should be followed:
- a) the child and parent(s)/caretaker(s) should be accompanied to the medical examination by the worker
  - b) in situations where the parent is agreeable but unwilling or unable to be present for a medical examination, the child should then be taken by a worker with a signed agreement from the parents.
- ING-03.3 Where possible, both colour and black-and-white photographs should be taken of all relevant child abuse evidence. Photographs should also be taken of all physical injuries in child abuse cases where the child is apprehended or admitted to hospital. These photographs should be taken by a professionally qualified photographer since they may be used as evidence. Professional photographers are often available to Societies through the local police or hospital facilities.
- ING-03.4 The doctor, nurse or other medical person should be advised that he/she may be required to give evidence in court.
- ING-03.5 If, after a thorough examination, a doctor is unable to make a diagnosis indicating the possibility of child abuse, or of accidental injury, or believes the child has been abused but will not make a formal diagnosis to this effect, a second opinion or examination should be obtained.
- ING-03.6 Where appropriate, admission to hospital as a place of safety, assessment or treatment should be considered during the investigation/assessment process.

#### IN-04 **Assessment**

##### STANDARD

- INS-04.1 A service treatment plan shall be developed and shall be stated in writing in the file and shall be set within a time frame and revised as necessary as a result of additional information or changed circumstances in the case. (See "Case Supervision", Chapter 12, page 48, and "Case Review", Chapter 13, page 50.)



### Guidelines

ING-4.1 Where practicable and appropriate the investigating social worker and/or supervisor, shall call a case conference for the purposes of making an assessment of the child's situation, to determine whether the child has been abused or is at risk and to develop a service plan for the child.

ING-4.2 Initial observations and family assessment should include:

- 1) An assessment of both parents (present emotional health; ability to cope with stress; relationship with spouse, child, extended family, friends and neighbourhood).
- 2) Significant information about the child, and his role in the family (emotional state; relationship with parents, siblings, school, other children and adults).
- 3) Home, environment/neighbourhood assessment (condition of home; support systems available to the family; current family stresses).
- 4) Information and assessments from all involved professionals.
- 5) Diagnostic impressions. (Do parents have potential to abuse? Is child in some way difficult? Are there precipitating crises which can trigger abuse? Is the child safe in the home?)
6. Consultation (with supervisor, child abuse team, etc.).
7. Plan of action (immediate or longer term, 30 days).

For further information on assessment see Clinical Assessment in Children's Services, Ministry of Community and Social Services, Children's Services Division, April 1979.



## 2. VERIFICATION OF THE INFORMATION OF ALLEGED CHILD ABUSE

### Commentary

The Child Welfare Act, 1978, 52(2) directs every Society that receives information of child abuse shall, after the information is verified in the manner determined by the Director, report the information to the Director. The manner of reporting is the Form 6, Report to Child Abuse Register, which is a report of verified information concerning alleged child abuse.

Evaluating the 'seriousness' of alleged abuse in order to determine whether it warrants a report to the Central Abuse Register is not an easy task. Too broad an interpretation of the abuse definitions will inundate the Register with reports and thereby undermine its effectiveness as a monitoring tool. On the other hand, too narrow an interpretation will exclude from the Register those cases which should rightfully be tracked, and diminish its effectiveness altogether. The task of a Children's Aid Society is to achieve a balance between these two extremes, guided by the specific circumstances and history of each case. For example, a single bruise does not as a general rule constitute 'abuse' which should be reported to the Central Register. However, it may warrant a report if it is the result of successive incidents of discipline shown to border on the excessive. A minor injury should never be disregarded if high risk indicators show that the child is living in an actually or potentially abusive household.

As a result of its investigation of any particular case, the Children's Aid Society may conclude that:

- o the complaint is frivolous or unfounded or not of a serious nature. In such cases no report is filed with the Register.
- o the child has been or is being abused, but the identity of the abuser is not known or is uncertain. In such cases the report is filed with the Register but the Society completes only those parts concerned with identification of the child.
- o the child has been or is being abused and that the abuser is known. In such cases, a complete report is filed with the Register. This would include those cases where the parent and/or other caretaking person can offer no plausible explanation for the abuse and circumstances indicate that the person is responsible for it.
- o the evidence is inconclusive with respect to the alleged abuse, the identity of the abuser or both. In such cases, the Society should carefully consider its evidence before deciding not to submit a report. If the Society is prepared to defend its decisions in a subsequent expungement proceeding, the report should be submitted to the Register.

Information of alleged abuse is 'verified' and reportable once the Local Director of the Children's Aid Society, on the basis of his Society's investigation and consultation with other professionals (if appropriate), has reasonable grounds to believe that the child is or has been abused. It is desirable that a multi-professional assessment team (or child abuse tea) be utilized in arriving at such verification. In most communities teams already exist and in communities where they do not exist, the Ministry is prepared to assist agencies in developing such teams. If further clarification is desired see: Protection and Care of Children, Training Materials, ABUSE, (yellow book), January 1979; Supplement to Training Materials on Child Abuse Reporting Laws June 1979; Child Abuse Reporting Laws (blue book) June 1979; and Memorandum No: 2024-79, The Director's memo to Presidents and Local Directors re: Verification of Suspected Abuse. (A compilation of the first two has been prepared for the public and is available at the Ontario Government Bookstore.)

**VE-01                      Verification of Information of Abuse**

STANDARD

VES-01.1                Information of alleged abuse is verified and reportable once the Local Director of the Children's Aid Society, on the basis of his Society's investigation and consultation with other professionals (if appropriate), has reasonable grounds to believe that the child is or has been abused.

VES-01.2                Report of all verified cases of child abuse shall be forwarded by the Local Director to the Central Register (Form 6) within 14 days. The Director of Child Welfare directs the informaton be verified in accordance with the supplement to Training Materials on Child Abuse Report Laws, June 1979. The 14-day limit can be extended by a Director in exceptional circumstances. (See section 27(2) of O.R. 388/79.)

Guidelines

VEG-01.1                In all situations, it is recommended that in the deliberations for verification, the Society should:

- a)    ascertain the welfare of the child,
- b)    review all relevant information obtained from the investigation/assessment,



- c) determine the facts obtained in the investigation that support or refute the allegations in the complaint, and/or additional allegations of abuse arising from the investigation,
- d) list all evidence/proof obtained in the investigation/assessment that substantiate the facts in b) above,
- e) review all professional opinions which pertain to the existence of child abuse in the particular case,
- f) list all the factors which support the judgements,
- g) list all factors which do not support the judgements.

VEG-01.2 Where the information of abuse is verified, the following should then be determined:

- a) the child's immediate condition at home,
- b) the court process to be followed (see "Police Involvement" and "Court Involvement"),
- c) further investigatory/assessment steps to be undertaken,
- d) any treatment/management recommendations,
- e) any case monitoring strategies.



### 3. CASE MANAGEMENT

#### Commentary

Following the completion of a child abuse investigation, one of six outcomes is possible.

- 1) Child abuse does not appear to exist.
- 2) Child abuse does not appear to exist but the family requests or agrees to Children's Aid Society services.
- 3) There exists some substantive grounds to believe that the child is abused, but there is not sufficient grounds for verification of the information and the child remains with the parents.
- 4) There exists some substantive grounds to believe that the child is abused and there is not sufficient grounds for verification of the information but this and/or other factors warrant the removal of the child to a place of safety.
- 5) There is verification of the information of abuse; child remains with parents.
- 6) There is verification of the information of abuse; the situation warrants the child be removed to a place of safety.

Each of these decisions requires a specific form of case management by the Children's Aid Society. In some situations another agency may assume, under the auspice of the Children's Aid Society, partial responsibility for the care/treatment of a child. However, it must be emphasized that regardless of service assignments, the ultimate responsibility for protection and case management rests with the Children's Aid Society.

CM-01                      **Child Abuse Does Not Appear to Exist**

#### STANDARDS

CMS-01.1                      Where the identity of the reporter has been ascertained this source shall be thanked for their interest, and informed in general terms about the Society's response to their concern.

- CMS-01.2 Documentation of the investigation process and reasons behind disposition shall be made and placed on the file within twenty-one days of completion of the investigation
- CMS-01.3 The family shall be advised of the disposition within fourteen days of the completion of the investigation.
- CMS-01.4 Upon completion of the investigation, it is believed that the referral/report is done maliciously or without reasonable grounds to suspect that the information is true. Section 49(3) of The Child Welfare Act, 1978, directs that the file shall clearly indicate this finding. In addition, the reporter shall be contacted and informed of this finding. Consideration shall be given to filing a complaint of the offence with the police, Section 94(a) of The Child Welfare Act, 1978.

#### Guideline

- CMG-01.1 Reporting back is one of the most effective ways of accomplishing the essential of keeping the community informed of action taken when complaints are lodged. However, professional discretion shall be exercised on communicating the disposition of the case to significant reporting sources and/or other agencies involved in the investigating process. This also applies to those cases wherein child abuse is suspected and wherein there is verification of the information alleging child abuse.

#### CM-02 **Child Abuse Is Suspected**

#### STANDARDS

- CMS-02.1 Following investigation/assessment where:
- a) abuse is suspected
  - b) family does not voluntarily use Children's Aid Society service
- the situation shall be monitored by Children's Aid Society until the child is considered safe.



- CMS-02.2 Where child abuse is suspected and there exists reasonable and probable grounds that the child is in need of protection for it is believed that the abuse is of a serious nature and the child continues to be at great risk, the child shall be apprehended and a report recorded of why this action was taken in order to:
- a) protect the child
  - b) complete the investigation/assessment
  - c) allow the courts to make a final disposition on the basis of available evidence.
- CMS-02.3 Where child abuse is suspected but the child remains at home, the family shall be advised that child abuse is suspected and that appropriate other agencies which may be providing service to the family will be asked to involve the Children's Aid Society.
- CMS-02.4 The Children's Aid Society shall be responsible to see that monitoring is done in one or more of the following ways:
- a) see the family directly
  - b) alerting other resources (e.g., doctor, public health nurse, schools) to those factors causing the suspicion in the case
  - c) checking with or conferencing at least monthly with those professionals/others having access to the child or family
  - d) requesting that such persons involve the Children's Aid Society immediately should there be a further cause for suspicion or any incident of abuse or lack of access to the child. The Children's Aid Society shall also be advised if the family moves so that monitoring can continue through other appropriate agencies/Children's Aid Societies.
- CMS-02.5 Action in a) and b) above shall be confirmed in writing by the Children's Aid Society.
- CMS-02.6 Details of findings in b) above shall be recorded and placed in the protection file.

Guideline

CMG-02.7 See CMS-01.4.

CM-03 **The Information of Child Abuse is Verified**

In cases where the information alleging child abuse is verified, the following standards and guidelines shall be affected.

STANDARDS

- CMS-03.1 When the child for whom the information of abuse has been verified remains in the parental home, there shall be regular visits by a Children's Aid Society worker or designate at a weekly minimum. Visits may be more frequent depending upon the assessed degree of risk to the child.
- CMS-03.2 Regular physical examination shall be scheduled at reasonable intervals to ensure the safety of the child. These are to be conducted by a community health professional (either a qualified public health nurse or doctor).
- CMS-03.3 These visits shall continue until the case is transferred or terminated or until the home is considered safe.
- CMS-03.4 A missed visit by the family shall be seen as a potential danger signal and shall be followed up as soon as possible. Under no circumstances shall the visit be dropped until the next regular time.
- CMS-03.5 If a worker is unavailable and has to miss a visit the family shall be notified and arrangements to make the visit, either by the worker or a substitute, shall be made within twenty-four hours.
- CMS-03.6 Where another professional/agency is providing additional service the Children's Aid Society shall:
- a) determine clearly which professional/agency is assuming the additional treatment role and the extent of that agency's responsibility

- b) determine the treatment plan, and ensure that the other agency has a clear agreement with the family for service
- c) determine that the other professional/agency will obtain and provide information regarding incidents or suspicion of further abuse, any withdrawal or avoidance of service, or removal of the family to another location, or lack of access to the child, and
- d) ensure that a) b) and c) are confirmed in writing

CMS-03.7 Where the child remains at home and if another professional/agency is providing the service, the Children's Aid Society shall ensure that the professional/agency providing treatment and follow-up has direct access to and examines the child upon an agreed-upon frequency. Such examination and access shall be clearly delegated and carried out. At a minimum the child shall be seen on a weekly basis. The duration of such contact shall be as specified in CMS-03.3. Failure of the professional/agency to comply with these terms of contact will necessitate such examination by the Children's Aid Society.

CMS-03.8 The Children's Aid Society shall ensure and participate in a case conference with the other agencies involved at a minimum of every three months and shall document results of such contact.

CMS-03.9 Where information of abuse has been verified a report (Form 6) shall be submitted to the Director under sub-section (2) of Section 52 of The Child Welfare Act, 1978, within fourteen days. When the case remains open with the Society, a "follow-up report" (Form 7N) shall be made within four months after the making of the original report. Subsequent reports to the Director shall be made on each anniversary of the original report until the case is closed by the Society. (See Supplement to Training Materials on Child Abuse Reporting Laws, June 1979, and "Verification of the Information of Child Abuse".)



#### 4. POLICE INVOLVEMENT

##### Commentary

In addition to our therapeutic/helping role the Children's Aid Societies parallels the police, for each has a duty to protect children from abuse and to ensure that they are afforded the protection of the criminal law in addition to protection under The Child Welfare Act, 1978..

In cases where the protection services social worker has good access to the family and can help with family counselling, such family involvement is the treatment of choice. Failing this, police involvement is to be considered.

Since both the Children's Aid Society and the police have legal responsibilities in the area of child abuse and both have much to contribute to the intervention and management of these cases, it is important that a working partnership be developed between the two services. Standards and guidelines forming the basis of such a partnership have been formulated by the Ministry of Community and Social Services and the Ministry of the Solicitor General and are set out below. While it is recognized that local partnership arrangements will vary greatly, it is expected that a spirit of mutual co-operation will be developed and that the best interests of both the child and the community will be promoted.

Some relevant provisions of law are as follows:

- 1) Section 47 of The Child Welfare Act, 1978 provides the definition of abuse which is contained in the glossary.
- 2) A "child in need of protection" is defined in section 19 of The Child Welfare Act, 1978.
- 3) Responsibilities of the Children's Aid Society and police are set out in section 21 of The Child Welfare Act, 1978 and in certain other sections.
- 4) Relevant offences are outlined under both the Criminal Code of Canada and The Child Welfare Act, 1978.



PO-01      **Police Involvement**

STANDARDS

- POS-01.1      Police shall be informed of all complaints received of alleged child abuse according to a predetermined plan that will have been worked out jointly by the police and local Children's Aid Society.
- POS-01.2      A plan shall be developed jointly by the local Children's Aid Society and the police to ensure that there is a cooperative working agreement.
- POS-01.3      Where the police are involved in an investigation of alleged child abuse, primary responsibility for the protection of the child shall remain with the local Children's Aid Society.
- POS-01.4      Primary responsibility for the enforcement of law and the prosecution of offences shall remain with the police.

Guidelines

- POG-01.1      At the time of notification and consultation, a decision should be made regarding the most appropriate and effective means of investigation.
- Possibilities are:
- a) police entrusting Children's Aid Society to investigate
  - b) Children's Aid Society entrusting police to investigate
  - c) parallel Children's Aid Society/police investigation
  - d) joint Children's Aid Society/police investigation.
- POG-01.2      There should be mutual sharing of relevant information respecting the investigation only.
- POG-01.3      Where the police are considering a criminal prosecution, they should normally consult with the Children's Aid Society and other involved professionals prior to laying charges.

- POG-01.4 Children's Aid Societies and police should both be involved in local Child Abuse Teams and conferences on cases of child abuse.
- POG-01.5 Children's Aid Societies and police should work together to develop a better understanding of each other's concerns, responsibilities and problems.
- POG-01.6 Children's Aid Societies and police should exchange information and training materials on child abuse.
- POG-01.7 Children's Aid Societies and police should ensure that social workers, physicians, nurses, lawyers, judges and teachers in the community are kept informed of all aspects of child abuse, including indicators, investigation, reporting legislation and referral procedures.



## 5. COURT INVOLVEMENT

### Commentary

Every Local Director and every person designated by the Board of Directors of a Society has the powers of a school attendance counselor under The Education Act, 1974, and a police officer. Any one of them shall be deemed to be an officer within the meaning of Section 10 of The Public Authority's Protection Act, and that section and the other provisions of that Act apply to them in the same manner and to the same extent as they do to the officers mentioned in The Child Welfare Act, 1978, s4(2). Thus a protection services social worker who is a legal officer of the Children's Aid Society may apprehend a child apparently in need of protection with or without a warrant or may apply to a court for an order requiring the person in whose charge the child is to produce the child before a court at the time and place named in the order, The Child Welfare Act, 1978, s21(1)

Section 47 of The Child Welfare Act, 1978 provides for the laying of charges in certain cases involving child abuse. These charges are heard in Provincial Court (Family Division). Criminal charges layed under the Criminal Code of Canada are heard in the Provincial Court (Criminal Division).

Civil liability involves an application in civil court to effect recovery of damages or compensation on behalf of an abused child. The Child Welfare Act, 1978 s.51 provides for such proceedings, or disposition may be sought under The Compensation for Victims Act. If either the Official Guardian or Children's Aid Society believe it to be in the best interests of the child, proceedings may be instituted and conducted on the child's behalf in respect of the abuse suffered.

In the pursuit to find a child in need of protection, various orders are permitted through application to the family court. An Order to Produce requires that the person(s) in whose care the child is bring the child before the court and an Order of Society Supervision ensures upon court order, that the Children's Aid Society is involved in the care and management of the child. These procedures are discussed in the following standards and guidelines.

The Child Welfare Act, 1978 section 20 makes provision for independent legal representation of the child. The necessity for such representation is determined by the court. This was delayed with the final passing of The Child Welfare Act, 1978. It is anticipated that this section will come into effect in the near future.

**CI-01 Court Involvement****STANDARDS**

- CIS-01.1 In cases where the child requires admission to care, the child shall be apprehended with or without warrant and taken to a place of safety. Temporary care by agreement shall only be considered in those unique cases where it is therapeutically indicated, that is, the family and social worker have a shared recognition of the problem and the family is motivated and has demonstrated a capacity to do something about it, thereby ensuring the safety of the child. For future reference, in the unlikelyhood that the agreement collapses, evidence should be gathered as though the matter were to be presented in court.
- CIS-01.2 In cases where abuse continues with significant change by the parents, an application under The Child Welfare Act, 1978 shall follow, recommending either a period of wardship or a period of Children's Aid Society supervision.
- CIS-01.3 The child who is apprehended may only be detained in a place of safety for a maximum of five days, at the end of which the Society must take further action as permitted under section 27(1) of The Child Welfare Act, 1978.
- CIS-01.4 In all child abuse cases where a child has been apprehended and has been in care, and where a recommendation of a return to parent(s) or other suitable person is made, that recommendation shall include a request for an order of Society supervision unless it is contratherapeutic.
- CIS-01.5 When Children's Aid Society supervision is being proposed the Society shall make specific reasonable recommendations to the court regarding the supervision of parent(s) and child, which may be accepted by the judge and included in the terms and conditions stated in the Court Order. These shall be documented and followed by the Society providing supervision.



### Guidelines

- CIG-01.1 In cases where the information of abuse is verified but the degree of abuse or risk does not require immediate apprehension or placement outside of the home, an Order to Produce, wherein the onus is upon the Children's Aid Society to convince the court that the child is in need of protection may be followed by an application for supervision of the child in the home. An application for supervision should be given serious consideration.
- CIG-01.2 The decision regarding court involvement (whether to apprehend, seek wardship, the child remaining at home, requests for an Order to Produce or an Order of Society Supervision, etc.), should be based on a full review with the supervisor (see "Case Supervision", Chapter 12, page 48) with the advantage of the consultative input from a case conference (see Glossary of Terms for details of Case Conference).

### CI-02 **Apprehension**

#### STANDARD

- CIS-02.1 The police shall be involved in situations where the use of force may be required to seek for or effect the apprehension of a child.

### Guidelines

- CIG-02.1 The apprehension of a child who is in immediate danger and in need of protection may occur with or without a warrant. The warrant should be used as a means of securing entry or access if someone is obstructing a Society's apprehension of the child. The warrant issued by the court is to be exercised for the specific purpose of searching for the child and detaining him, once found, in a place of safety.
- CIG-02.2 Some typical situations for which apprehension is warranted are:
- a) the parents or others refuse entry
  - b) the parents or others refuse access to the child

- c) the parents or others refuse to co-operate in effecting a physical or medical examination
- d) the parents or others attempt to hide the child
- e) the parent or others and child may abscond or disappear
- f) the child is alone in locked premises
- g) the parent(s)/caretaker(s) appears highly disturbed or unstable.

CIG-02.3 Warrants should be used to apprehend a child where the child is not in immediate danger but the parents refuse to give consent to the removal of the child.

CIG-02.4 Warrants may be used for children who are hospitalized as a result of child abuse to enable the hospital to detain the child.

### CI-03 **Supervision Orders**

#### STANDARDS

CIS-03.1 The primary responsibility to carry out the Order of Supervision shall be with the Children's Aid Society no matter what form the supervision of the child takes.

CIS-03.2 In situations where supervision orders are "frustrated" (e.g., parents refuse to cooperate, Children's Aid Society unable to effect, etc.) the matter shall be returned to Court immediately for further review and where the child may be endangered, the child shall be apprehended and reasons for the decision documented.

CIS-03.3 The terms and conditions of the supervision order and what is expected of the Children's Aid Society and of the parents shall be written into the Order by the court and shall be made known to all persons who will be affected by them (see The Child Welfare Act, 1978 Section 30(4)).

- CIS-03.4 The supervision of the child shall involve contact with the child for a length of time and at intervals as ordered by the Court. Where the Court has not specified the frequency of contact, this shall be at intervals no less than every seven days until the child is considered safe.
- CIS-03.5 Society supervision shall be augmented by physical examinations by a community health professional (a qualified public health nurse or doctor) at intervals which ensure the safety of the child.
- CIS-03.6 In situations involving supervision orders, the Children's Aid Society's review of these cases shall be conducted as specified under "Case Supervision", which requires review at certain critical times.

#### Guidelines

- CIG-03.1 Where an order of wardship has been refused by the Court but the Society believes that the child is still at risk, an appeal should be taken by the Society rather than returning the child to the parent under a Supervision Order unless therapeutically contraindicated.
- CIG-03.2 Other agencies should be asked to assist in the supervision of the child (e.g., public health, day care, school, family doctor).
- CIG-03.3 Where arrangements under the above are made, roles in the shared supervision of the child should be documented, and the responsibility for reporting and consulting clearly outlined and undertaken. (See CMS-03.6).

#### CI-04 **Legal Counsel**

#### STANDARDS

- CIS-04.1 The Children's Aid Society shall be represented by legal counsel in all contested child abuse cases where the child would be at risk if the application should fail. Guidelines related to this subject have been produced by the Ministry of Community and Social Services and shall be used to assist in decision making about the involvement of legal counsel.

### Guidelines

- CIG-04.1      Where a child has been apprehended and admitted to care in a child abuse situation, the Children's Aid Society should consider whether or not to make a recommendation to the court for independent legal representation for the child (see The Child Welfare Act, s. 20).
- CIG-04.2      Community child abuse teams should make every effort to include a lawyer as a team member.

### CI-05      **Review**

Case review is a general survey of critical evaluation and provides the method by which workers, supervisors and other professionals on a child abuse case may examine facts and evaluate or modify a case plan.

### STANDARD

- CIS-05.1      There shall be a full review by the Children's Aid Society of each case of those wherein there has been no verification of the information of abuse in advance of all scheduled court hearings and the results of such a review documented.

### Guidelines

- CIG-05.1      The review process should follow the same procedures as a case conference and should include a review of the decision regarding the type of court involvement recommended.
- CIG-05.2      Legal counsel for the Children's Aid Society should be present at the review where counsel has been or is likely to be involved in the case.

## 6. REMOVAL OF CHILD

### Commentary

The removal of the child from the family/caretaker is a step which, just as all other procedures related to child abuse, requires serious consideration. This necessitates careful examination of all aspects of the case. Except in an emergency, where immediate decision making is required in order to protect the child, this decision should be made with the benefit of supervisory consultation.

The issue to be addressed is whether the child is apparently in need of protection. Protection within the home with Society supervision is one possibility. If the child is found to need to come out of the home to ensure protection, the next step for the social worker is whether the child will come into care via one of the following:

- 1) child (if over 12) and parents voluntarily agree to care,
- 2) An Order to Produce is sought from the Court directing the child's parent(s)/caretaker(s) to produce him before the court for a determination of his need for protection, or
- 3) apprehension.

The statutory responsibility of the Society is to assess the child's apparent need for protection, and if there is reason to believe it exists, decide whether the child be removed from the home immediately, with or without warrant, or left in the home pending the court's adjudication of the alleged need for protection. In the latter case, the Society asks the court for an Order to Produce, an order that the child's parent(s)/caretaker(s) produce him before a court at a time and place stated in the Order.

Supervisory consultation as a requirement in the decision-making process takes place through a case conference, consultation with a child abuse team or through individual consultation with the supervisor.



RC-01      **Removal of Child**

STANDARDS

- RCS-01.1      Prior to removing a child from the home, the Children's Aid Society shall consider the possibility of work being done in the home by the Society or by another agency.
- RCS-01.2      In all cases where a serious condition of physical harm, neglect or sexual molestation exists which necessitates removal of the child to a place of safety, the admission to care shall be by apprehension with or without a warrant (see The Child Welfare Act, s21) or by agreement (see Court Involvement CIS-01.1).

7. RETURN OF CHILD

Commentary

The same analysis of factors that was discussed in the previous section applies when giving consideration to returning the child to the parents. Before a decision is made to return a child, a thorough evaluation is necessary to ensure that the home or care situation has improved enough that the child is safe and is no longer in peril.

This crucial decision requires the attention and supervisory consultation of a number of people involved in the case in order to evaluate changes which have occurred since admission to care and to consider what is in the "best interests of the child". (See Case Supervision, Chapter 12, page 48.)

RP-01                      **Return of Child**

STANDARDS

- |          |  |
|----------|--|
| RPS-01.1 | The Ministry shall be informed when the Court has ordered that the child be returned to the parents and the Society feels that the child is still at risk.   |
| RPS-01.2 | In controversial or particularly problematic cases the Program Advisor shall be advised (see "Reporting to the Ministry", Chapter 10, page 42).  |
| RPS-01.3 | In cases where there has been verification of the information of abuse and a child has been admitted to care and then returned to the parent(s)/caretaker(s), the follow-up period shall be stated in the court order and the frequency of contact recommended to the court shall be at least every seven days until the child is considered safe. |



## 8. LOST CHILD

### Commentary

This section refers to those active case situations wherein a child who is considered to be at risk because he is suspected to have been seriously abuse, or for whom there has been verification of the information of abuse, is lost or missing. The lost child may or may not be in agency care.

#### LC-01            **Lost Child**

##### STANDARDS

- |          |   |
|----------|---|
| LCS-01.1 | Every reasonable effort shall be made by the Children's Aid Society to discover the whereabouts of the missing child and ensure said child is adequately protected.   |
| LCS-01.2 | Immediate notification to the Children's Aid Society Supervisor and Local Director.   |
| LCS-01.3 | Immediate notification to the parent(s) and all known caretakers.   |
| LCS-01.4 | Immediate notification to the Central Register. The Central Register has made a practice of sending out alerts in regard to a missing child. The reporting agency shall notify the Central Register by a letter which shall identify the child and briefly outline the salient content of the case in the manner to be forwarded by the Central Register in their alert to other agencies, provinces and/or countries as indicated by the letter of notification. |
| LCS-01.5 | The police shall be notified as soon as possible and no later than twenty-four hours after receipt of the information.  |
| LCS-01.6 | For those "lost" children who were subject to supervisory orders, the Children's Aid Society shall return to court for review.  |
| LCS-01.7 | In urgent cases with specific clues as to the child's whereabouts, the appropriate child welfare agency shall be advised by phone requesting immediate assistance and action.   |

- LCS-01.8 Any significant new information shall be communicated to the police and/or other appropriate child welfare agencies.
- LCS-01.9 The local Children's Aid Society shall continue to monitor and document such efforts to locate the "lost" child for a minimum of one year.



## 9. MISSING FAMILY

### Commentary

This section refers to those active case situations where a family for whom the Children's Aid Society is attempting to provide or coordinate protective service cannot be located. In such cases, where serious abuse is suspected or there has been verification of the information and the child has remained with the family, the following standards and guidelines apply.

#### MF-01 **Missing Family**

##### STANDARDS

- |          |   |
|----------|---|
| MFS-01.1 | Every reasonable effort shall be made by the Children's Aid Society to discover the whereabouts of the missing family and to resume service.  |
| MFS-01.2 | Immediate notification to the Children's Aid Society supervisor and Local Director  |
| MFS-01.3 | Immediate notification to the Central Register. The Central Register has made a practice of sending out alerts in regard to a missing family. The reporting agency shall notify the Central Register by a letter which shall identify the family and briefly outline the salient content of the case in the manner to be forwarded by the Central Register in their alert to other agencies, provinces and/or countries as indicated by the letter of notification. |
| MFS-01.4 | Notification of known associate agencies, including police, in the local Children's Aid Society's area of jurisdiction, of the need to locate the family and that the Children's Aid Society is to be immediately notified of the family's whereabouts if located.  |



## 10. REPORTING TO THE MINISTRY OF COMMUNITY AND SOCIAL SERVICES

### Commentary

In addition to reporting to the Central Register the "Verification of Information of Child Abuse" (see Chapter 2), "Lost Child" (see Chapter 8), and "Missing Family" (see Chapter 10), the Society shall report to the Ministry the following incidences of serious occurrences.

### Reporting of Serious Occurrences

These guidelines have been developed to ensure the protection of children in care and safeguard their rights, the rights of their parents/families, and the rights of staff involved with the children. The agency Director shall report to the Minister all serious occurrences of child abuse within the Society by phone to the Program Advisor responsible for that area as soon as possible, no later than twenty-four hours. When the program advisor is not available, the report is then made to the Area Manager, Regional Director, or directly to the central Information Support Unit of the Ministry, in that order.

These procedures of reporting are designed to ensure that serious occurrences are known to both the agency Director and the Ministry. It is expected that most instances will be handled totally in-house by the agency. It is not intended that the Ministry be used in a manner which removes authority, responsibility and accountability from those who are in charge of the agency itself. The independent nature of the agency will be recognized and supported.

When the report is made to the Ministry, one of three possible courses of action may be decided upon:

- 1) the agency assumes responsibility
- 2) an investigation is carried out by the Ministry
- 3) a fuller review and more thorough and objective investigation will be carried out.

For further clarification, a finalized document of guidelines for the reporting and follow-up of serious occurrences in the Children's Services Division is expected in the Fall of 1979.

## RM-01      **Reporting of Serious Occurrences**

### STANDARDS

RMS-01.1      The following situations shall be reported to the Ministry by telephone within twenty-four hours:

- a) all deaths of children in care, while under the supervision of, or while participating in, Divisional programs including death resulting from abuse, accident, suicide, medical, or non-accidental causes,
- b) all serious injuries to children in care, while under the supervision of or while participating in divisional programs. This includes the following:
  - i) all non-accidental injuries to children in care
  - ii) all injuries which may have been related to neglect by the caretakers of the child
  - iii) all unexplained injuries requiring medical treatment,
- c) all allegations and accusations of abuse against staff, foster parents, volunteers, group foster parents, babysitters, friends and associates of staff responsible for children, and temporary caretakers of children in other systems not directly accountable to the Division; e.g., education, private camps, commercial enterprises, regarding abuse or mistreatment of children where abuse or mistreatment by staff is suspected. This includes those that are attributable to the use of specific clinical techniques, apparatus, or facilities of a clinical or educational nature,
- d) grievances of a serious nature made by or about children in care.
- e) all disasters such as fire in the agency,
- f) all cases involving a major breach of confidentiality; e.g., improper or unauthorized release of records.

RMS-01.2      Whenever a serious occurrence has occurred, or is suspected, the staff, or any other person witnessing or having knowledge of the occurrence shall report the occurrence immediately to their supervisor.

- RMS-01.3 The individual to whom the occurrence has been reported will conduct a preliminary inquiry and notify the agency Director immediately.
- RMS-01.4 In some cases, particularly those involving alleged staff abuse of a child, notification of the police or crown attorney and the Children's Aid Society are clearly warranted. In other, less clear cases, requiring judgement, the Ministry may be consulted for advice. A preliminary written report should be completed as soon as possible before going off duty. The report should be co-signed by another staff member if possible.
- RMS-01.5 All persons having knowledge of the occurrence should remain at the agency until they are excused by the individual responsible for the preliminary inquiry.
- RMS-01.6 If, on the basis of the preliminary inquiry, there is reason to suspect that a child has been abused, the staff member in charge will immediately request a medical examination of the child and photographs as might be appropriate. A written report and an opinion as to the probable cause of the injury shall be requested from the attending physician.
- RMS-01.7 If, on the basis of the preliminary inquiry, there is reason to suspect that there has been abuse of a staff member, the staff member in charge will immediately request a medical examination of the injured staff member.

#### Guidelines

- SRUMG-01.1 As indicated above, the findings of the preliminary inquiry must be conveyed immediately to the agency Director. Within some agencies there may then be an established procedure to inform the Board of Directors. Based upon the findings of this report, the agency Director shall decide:
- i) whether the occurrence falls within the definition of serious and therefore should be reported to the Ministry.
  - ii) if the occurrence is reportable in the opinion of the agency Director, whether an investigation (to be carried out by the Ministry) should be recommended. The decision as to whether an investigation is necessary will be made by the Ministry upon consultation with the agency Director and/or Board of Directors (if applicable).



- iii) whether, if abuse of a child by staff is suspected, the staff involved should be suspended pending further investigation
- iv) upon consultation with the Ministry, if required, whether or not to involve the police or Crown Attorney and/or Children's Aid Society in further investigation, thereby providing the child with the protection afforded in such Acts as The Child Welfare Act, 1978 and The Criminal Code.

## 11. DEATHS OF CHILDREN

### Commentary

The standards outlined in this section are designed to assist the Children's Aid Society in the management of cases where children die as a result of suspected or verified information of child abuse.

#### DC-01 Deaths of Children

##### STANDARDS

- DCS-01.1 The Children's Aid Society shall make immediate contact with the local law enforcement agency regarding details, possible charges and the conducting of an investigation into the death of a child. This contact shall be made no later than one hour after receiving the initial report (see "Police Involvement").
- DCS-01.2 The Children's Aid supervisor and/or Local Director shall be advised of the death of a child within one hour of the receipt of the information.
- DCS-01.3 The Ministry of Community and Social Services shall be advised of a child's death as soon as possible within forty-eight hours of the receipt of information. (see "Reporting to the Ministry", Chapter 10, page 42.)
- DCS-01.4 The Children's Aid Society shall be responsible for appropriate steps to investigate, assess and protect any other children in the family (see "Investigation", "Assessment", Police Involvement).
- DCS-01.5 The Children's Aid Society shall ascertain if an inquest is to be held and document reasons given for the decision.
- DCS-01.6 The Children's Aid Society shall be represented at an inquest if one is being held.

### Guidelines

- DCG-01.1      The Children's Aid Society should review the necessity and desirability of being represented by legal counsel at the inquest.
- DCG-01.2      In all cases of accidental death of a child in a known or suspected child abuse case an autopsy should be requested of the Coroner. Subsection 23(1) of The Coroner's Act, 1972, provides for post mortem examinations and analysis at the discretion of the Coroner and as the circumstances warrant.

## 12. CASE SUPERVISION

### Commentary

Case supervision of child abuse investigations and case management should be undertaken by a qualified supervisor who has had experience and training in the management of child abuse cases. (see Regulations to The Child Welfare Act, 1978).

### CS-01 Case Supervision

#### STANDARDS

- CSS-01.1 Except in emergency situations, workers who are investigating or managing child abuse cases shall review these cases with the supervisor routinely on at least a monthly basis. Specific suggestions for supervision are:
- a) the point of initial referral. This will ensure that all necessary steps are considered and taken during the investigation stage,
  - b) any point during the investigation stage where the worker has concern or difficulties,
  - c) at the completion of the initial investigation. This will provide a review of the investigation and an opportunity to consider the disposition:
    - i) case closed,
    - ii) case opened,
    - iii) case plan,
  - d) preparation for all case conferences,
  - e) when consideration is being given to removing a child from the home,
  - f) when consideration is being given to involving the police or the courts,
  - g) when consideration is being given to returning the child to his home/parent,
  - h) when a case is to be transferred,

- i) when a client is "missing",
- j) when a child in care or subject to a supervision order is "lost", "missing" or AWOL,
- k) when consideration is being given to terminating a case,
- l) when there are significant changes in the treatment plan,
- m) when there are major crises in the family,
- n) any situation which requires reporting to the Ministry of Community and Social Services,
- o) before the assigned case worker leaves for any extended absence from the agency, or permanently leaves the agency,
- p) at the option of the supervisor or worker.

CSS-01.3 Each Children's Aid Society shall establish and maintain a documented plan for child abuse case management which shall include but shall not be limited to:

- a) access for supervisors to more senior staff for consultation about difficult case decisions,
- b) the designation of alternative workers in the absence of a senior staff member.

#### Guidelines

CSG-01.1 The Children's Aid Society shall ensure 24-hour availability of qualified supervisory consultation to Society case workers.

CSG-01.2 In order that supervisors remain in touch with front-line service, and to maximize their assistance to front-line staff, supervisors' participation in the management of a small number of child abuse cases is to be given consideration.



### 13. CASE REVIEW

#### Commentary

The purpose of this section is to promote the uniform understanding and use of case review. Case review is a general survey of critical evaluation and provides the method by which workers, supervisors and other professionals on a child abuse case may examine facts and evaluate or modify a case plan as a means of continuing adequate service to a child and/or a family. In cases where abuse occurs in care the Children's Aid Society is responsible for providing internal review of the case and would follow the same procedures of assessment and verification of the information as in any other abuse investigation.

#### CR-01 Case Review

##### STANDARDS

- CRS-01.1 All child abuse investigations, open protection cases, and child care cases where abuse has occurred, shall be reviewed according to the times indicated under "Supervision" and in keeping with the process indicated under the following sections:
- a) removal of child from parents
  - b) return of child to parents
  - c) termination of case
  - d) police involvement
  - e) court involvement.
- CRS-01.2 Records of all case reviews shall be filed in accordance with procedures outlined under Record Keeping.
- CRS-01.3 The Children's Aid Society shall establish a system, by which all cases designated as child abuse could be reviewed as outlined under Case Supervision.



## 14. TERMINATION OF CHILD ABUSE CASES

### Commentary

The closing of child abuse cases and termination of Children's Aid Society service requires most careful consideration. As with all the case management areas, professional judgement in dealing with the termination of child abuse cases is imperative.

#### TE-01 Termination of Child Abuse Cases

##### STANDARDS

- TES-01.1 Termination shall result in child abuse cases upon direction of the court, Crown wardship, or when the child's environment is assessed to be safe.
- TES-01.2 Other agencies and professionals involved in the case shall be informed of the decision to terminate service and shall be made aware of the Children's Aid Society's availability for future contacts.
- TES-01.3 The Children's Aid Society shall advise the Central Register of termination decisions. (See Supplement to Training Materials on Child Abuse Reporting Laws, June 1979)
- TES-01.4 If there are any outstanding court orders respecting the child or family, the matter shall be returned to court for review and recommendation prior to termination of service.



## 15. TRANSFERS

### Commentary

From time to time, due to a variety of reasons such as; worker or family mobility, or worker and family personality clash, it is necessary to transfer management of a child abuse case to another worker or agency. Such a transfer is difficult for most clients. This difficulty is heightened in abusing families which frequently have problems in trusting others and in reaching out for help. In many cases, a transfer can become a 'crisis' for the family, therefore the worker should be sensitive to this possibility and should be readily available during this period.

### TR-01                      Transfers Within the Agency

#### Guidelines

- |          |   |
|----------|---|
| TRG-01.1 | The transfer plan should be developed in consultation with the supervisor.  |
| TRG-01.2 | The transfer should be effected through a full case review involving both workers and the supervisor.   |
| TRG-01.3 | All related agencies actively involved with the family should be advised of the transfer, and should be given the name of the new worker responsible for the case.  |
| TRG-01.4 | <p>Transfers should be effected as gradually and as sensitively as possible, in the following manner:</p> <ul style="list-style-type: none"> <li>i) The family should be advised and preparation should begin well in advance of the impending transfer.</li> <li>ii) The new worker should be introduced gradually to the family.</li> <li>iii) Where possible, both workers should have several contacts with the family before the transferring worker terminates services to the family.</li> </ul> |



TR-02      **Transfers Within Ontario to Geographically Adjacent  
Children's Aid Society**

STANDARDS

- TRS-02.1      The transferring agency shall send a copy of complete records regarding the family which shall include the following:
- a) copy of case recording including details regarding incidents of abuse, dynamics of the family, involvement with the agency, degree of cooperativeness, degree of risk, goals achieved (not achieved), treatment needs and plans for the family at point of transfer, areas of sensitivity, list of possible crises for the family, any other important or special considerations (see "Record Keeping" as per Section I, case file).
  - b) copy of photographs (where applicable)
  - c) copy of court orders (where applicable)
  - d) copy of any other relevant reports.
- TRS-02.2      In urgent situations, relevant information shall be telephoned directly to the agency receiving the transfer within two hours and followed by written referrals and records within fourteen days.

Guidelines

- TRG-02.1      The guidelines under Transfers Within the Agency should be utilized.
- TRG-02.2      Participation in the case review should include representatives of all agencies having significant responsibility in the case and their counterparts in the adjacent jurisdiction. Face-to-face or a conference call might be considered.
- TRG-02.3      The previous worker should disengage when the new worker has assumed responsibility for the family.

TR-03            **Transfers Outside of Ontario**

STANDARDS

- TRS-03.1        Complete details regarding the case (see TRS-02.1) shall be sent to the child protection agency in the province/state where the family is residing and shall be sent via normal interprovincial channels.
- TRS-03.2        See TRS-02.2.
- TRS-03.3        In cases involving transfer to countries other than the United States, referral via normal international channels shall be utilized and complete details of the case forwarded to the agency providing service.
- TRS-03.4        A written report informing the Ministry, within fourteen days, of the transfer shall be made and shall include the following:
- a)    full name of child
  - b)    sex of child
  - c)    date of birth
  - d)    legal status
  - e)    identification of parent or parents
  - f)    summary of circumstances respecting the situation
  - g)    other pertinent information or reports.

Guidelines

- TRG-03.1        The transfer plan should be developed in consultation with the supervisor.



## 16. RECORD KEEPING

### Commentary

The following procedures are important steps in standardizing record keeping and facilitating access to records in child abuse cases for those providing service to individuals and families. For the Children's Aid Society, record-keeping is a crucial tool as there are many instances where a worker's notes or a file are required for evidentiary purposes. This necessitates that recording information is done as closely as possible to the time of the actual interview/observation. All regulations and requirements for record keeping, as outlined by The Child Welfare Act, 1978 or Ministry of Community and Social Services directives, shall be observed.

#### RK-01 **Record Keeping**

##### STANDARDS

RKS-01.1 Every Children's Aid Society shall make suitable arrangements to ensure the safekeeping of all Children's Aid Society records and shall provide documentation of these arrangements.

RKS-01.2 Every Children's Aid Society protection case file and every Children's Aid Society child care file shall be divided into four separate sections with the following contents:

##### SECTION I

All case recordings, case notes, case review recording and social history.

##### SECTION II

All special reports directly related to the case including:

- psychological assessments or tests
- reports from various medical specialists (doctors, psychiatrists)
- school reports
- police occurrences
- alternate care reports

### SECTION III

All court documentation.

### SECTION IV

All other correspondence and case material.

RKS-01.4 All sections of the file shall appear in chronological order.

RKS-01.5 Every Children's Aid Society shall establish and maintain an internal registry of active and closed child abuse investigations and cases.

RKS-01.6 Access to the internal registry shall be limited to Society staff.

RKS-01.7 Every Children's Aid Society shall record any report respecting child abuse within twenty-four hours.

RKS-01.8 A detailed recording of the initial investigation of alleged abuse shall be completed within twenty-one days of receipt of the allegation.

RKS-01.9 Case recording shall be ongoing and shall be completed at least every three months. (The Ministry of Community and Social Services will provide consultation with respect to means of improving case recording.)

RKS-01.10 In addition to quarterly case recording, additional recording shall be placed on the file regarding all major case review/conferences/decision-making (see "Case Supervision") in those cases of verified information of child abuse until the home is assessed safe for the child.



- RKS-01.11 All case recording shall be initialed and dated by the case worker and read and initialed and dated by the supervisor.
- RKS-01.12 All Society case workers shall be provided with and utilize a daily case notebook, which shall be the property of the Society and shall contain the worker's handwritten notes

#### Guidelines for Keeping Case Notes in Child Abuse Cases

1. Brief notes should be made on all cases immediately after the occurrences of the events.
2. The data should include:
  - a) date, time, names and addresses of people involved
  - b) significant details pertinent to the investigation
  - c) date and time of the recording.
3. Notes should include all contacts, including telephone and written communications with clients, relatives, neighbours, agencies, etc.
4. Notes should also include unsuccessful attempts to contact the client and appointments missed or cancelled.
5. Notes should also include the significant material and documentation which contributes to the assessment.
6. Notes must be legible in case they are admitted to court or in worker's absence another needs to read them.
7. Notes should be retained for all cases at least two years following case closing, unless information in the notes has been recorded in the file.
8. Society procedures regarding confidentiality of records must be observed. Care should be taken to ensure that notebooks are not left where they can be seen by the public.

### Guidelines

- RKG-01.1 Information from the internal registry should be available on a 24-hour basis.
- RKG-01.2 Emergency after-hours staff should have access to an updated listing from this registry.
- RKG-01.3 All case files listed in this registry should be colour coded to facilitate identification and urgency.
- RKG-01.4 All case files listed in this registry should be readily accessible on a 24-hour basis.







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